



*The Commonwealth of Massachusetts*

*Department of Public Safety*

*One Ashburton Place, Room 1301*

*Boston, Massachusetts 02108-1618*

*Phone (617) 727-3200*

*Fax (617) 727-5732*

**APPLICATION FOR ADDITIONAL FOUR-YEAR CERTIFICATE FOR  
ELEVATORS IN OWNER OCCUPIED SINGLE FAMILY RESIDENCES**

ELEVATOR COMPANY: \_\_\_\_\_

ELEVATOR STATE ID NUMBER: \_\_\_\_\_

ELEVATOR ADDRESS: \_\_\_\_\_

\_\_\_\_\_

To the best of my knowledge, the above-identified elevator currently has a one-year inspection certificate and, under the new law, falls within the definition of an elevator within an owner occupied single family residence. On behalf of the elevator owner, I am hereby requesting an additional four-year certificate for the above-identified elevator.

\_\_\_\_\_  
Signature of Elevator Company Representative

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name

**Mail form to: Department of Public Safety, One Ashburton Place, Room 1301,  
Boston, MA 02108-1618, Attn: Debbie Ho**